PATENT APPLICATION FEE DETERMINATION RECORD

Application or Docket Number

10/517099

CLAIMS AS FILED - PART I								SMALL E	אדודץ	OR	OTHER	THAN
TOTAL CLAIMS			(Column 1)		(Column 2)]	RATE	SEC.	1		
FOR			NUMBER FILED		NUMBER EXTRA		1		FEE		RATE	FEE
TOTAL CHARGEABLE CLAIMS			ninus 20 =		10 mach extra		-	BASIC FEE		OR	BASIC FEE	950
					• 160			X\$9=		OR	X \$ 18 =	204
INDEPENDENT CLAIMS MULTIPLE DEPENDENT CLAIM P			minus 3 =		•			X \$ 44 =		OR	X \$ 88 =	
_								+ \$ 150 =		OR	+ \$ 300 =	
* If the difference in column 1 is less than zero, enter "0" in column 2 CLAIMS AS AMENDED - PART II OTHER (Column 1) (Column 2) (Column 3) SMALL ENTITY OR SMALL ENTITY OR SMALL ENTITY OR OTHER												
6	45-06°	(Column 1)	AMENDED	- PAR	T . mn 2) (Column 3)			SMALL ENTITY		OR	OTHER THAN SMALL ENTITY	
AMENDMENT A	• .	CLAIMS REMAINING AFTER AMENDMENT		HIGI NUM PREVI	HEST IBER OUSLY FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL PEE
	Total	.20	Minus	-2	3	- 0		X \$ 9 =		OR	X \$ 18 =	
	independent	• /	Minus	2	,	<u>- 0</u>		X \$ 44 =		OR	X \$ 88 =	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT				CLAIM			+ \$ 150 =		OR	÷ 8 300 =	
				TOTAL ADDIT. FEE		OR	TOTAL ADDIT, FEE					
		(Column 1)		(Colu	mn 2)	(Column 3)	1 1			· •		
AMENOMENT B		REMAINING AFTER AMENDMENT		NUM PREVI	BER OUSLY FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=		X \$ 9 =		OR	X \$ 18 =	,
	Independent	•	Minus	•••		3		X \$ 44 =		OR	X \$ 88 =	
	FIRST PRESE	NTATION OF N	AULTIPLE DEP	CLAIM			+ \$ 150 =		OR	+ \$ 300 =		
(Column 1) (Column 2) (Column 3)								TOTAL ADDIT. FEE		OR	TOTAL ADDIT. FEE	
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVI		PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE "
	Total ·	*	Minus	**		=		X \$ 9 =		OR	X \$ 18=	
	Independent	•	Minus	***		=]	X \$ 44 =		OR	X \$ 88 =	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							+ \$ 150 =		OR	+ \$ 300 =	
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3. ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20". *** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3". The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.												
i	The "Highest Nur	nber Previously Pa	aid For (Total or l	ndepende	nt) is the i	nighest number fo	ound in	the appropriate	e box in cotur	nn 1.		

FORM PTO-875 (Rev. 11/2004)

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